

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE         |
|---------------------------|----------|--------|--------------|
| FEE DETERMINATION         |          |        |              |
| O.I.P.E. CLASSIFIER       |          |        |              |
| FORMALITY REVIEW          |          |        |              |
| RESPONSE FORMALITY REVIEW | G. S. W. |        | 22 JAN. 2001 |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim    | Date   |
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| Final    |        |
| Original |        |
| 1        | 5/1/01 |
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| Claim    | Date |
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| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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